FOR INSTRUCTIONS, SEE BACK OF FORMUS		FORM	STATEMENT
CHECK ONE:		DR-1	OF
☐ This is an initial* Statement of Organization FAIGH DI 30	n	(Rev. 10/2009)	ORGANIZATION
IM This is an <b>amended</b> * Statement of Organization	Reset Form	For Office Use	Only
* Statement must be filed within 10 days of committee accepting contributions incurring debts exceeding \$750. Amendments must be filed within 30 days of	, making expenditures, or	Comm. #	
Effective January 1, 2010, all statements and reports filed by new committees	a cnange.	Indexed	
electronically and effective January 1, 2012, all statements and reports filed b	vall committees for state office	Audited	
must be filed electronically.	y an committees for state office	Computer	
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.			
COMMITTEE NAME $\downarrow \downarrow$ (A candidate's committee must include the candidate's last name in the name of the committee.) If amending committee name,			
put old name in ( ).			
JOHNSON COUNTY GREEN CENTRAL CO	MONITEE PA.C.		
IMPORTANT: Indicate type of committee you are reporting for:			
(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)Statewide PAC (3)State Party (4)County Central Committee			
(5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC			
(10)School Board or Other Political Subdivision PAC (11) Ballot Issue (including committee involved in multiple city/county ballot issues)			
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (mane	latory except for a	randidate's committee\
Name ↓ ↓	Name ↓ ↓ .		candidate's committee)
MS. HOLLY HART	MS. HOLLY HAR	<u>T</u>	
Mailing Address ↓ ↓ POBox 2448	Mailing Address ↓ ↓ 244 8		
City, State ↓ ↓ Zip Code ↓ ↓	POBOX 2448	1	
TOWA CITY IA 52244-2448	City, State ↓ ↓ Zip Code ↓ ↓	EA 52244	+- 5440
· · ·		-	1 0110
Phone (3(9) 337- 7341	Phone (319 <u>337 - 7</u>	341	
e-Mail hhast 2 @ mac.com	e-Mail hhart 2 C		
INDICATE PURPOSE OF COMMITTEE - Check One Box Advo	e-Mail hhar 2	mac. c	<u>om</u>
Comment or description:	cate for/against candidate(s)	Advocate for ballot iss	sue(s)
All Candidates Enter:	County/Local Candidates	Advocate against ball	ot issue(s)
Office Sought:		and Danot 15509 CO	minitees Enter.
Dolliton Darty (if and linetally)	County: LINN		
Political Party (if applicable) (If active in multiple ballot issue elections, attach list of counties			
District:	Date of Election:		
Year Standing for Election:	Date of Election:		
Year Standing for Election:  Bank Account Name (must match committee name)	Candidate name & Address or	Parent Entity (PACs	
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Year Standing for Election:  Bank Account Name (must match committee name)  JOHNSON COUNTY GREEN CENTRAL COMMITTEE  Name of Financial Institution/type of Account	Candidate name & Address or	Parent Entity (PACs	
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Year Standing for Election:  Bank Account Name (must match committee name)  JOHNSON COUNTY GREEN CENTRAL COMMITTEE  Name of Financial Institution/type of Account  HILLS BANK CHECKING ACCOUNT	Candidate name & Address or ↓ ↓  Mailing Address ↓ ↓	Parent Entity (PACs Affiliate, or Sponso	<u>I</u>
Year Standing for Election:  Bank Account Name (must match committee name)  JOHNSON COUNTY GREEN CENTRAL COMMITTEE  Name of Financial Institution/type of Account  HILLS BANK CHECKING ACCOUNT  Mailing Address    ACCOUNT	<u>Candidate name &amp; Address</u> or ↓ ↓	Parent Entity (PACs	
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Year Standing for Election:  Bank Account Name (must match committee name)  JOHNSON COUNTY GREEN CENTRAL COMMITTEE  Name of Financial Institution/type of Account  HILLS BANK CHECKING ACCOUNT  Mailing Address  The Annual St.  City I State I Zip I	Candidate name & Address or ↓ ↓  Mailing Address ↓ ↓	Parent Entity (PACs Affiliate, or Sponso	<u>I</u>
Year Standing for Election:  Bank Account Name (must match committee name)  JOHNSON COUNTY GREEN CENTRAL COMMITTEE  Name of Financial Institution/type of Account  HILLS BANK CHECKING ACCOUNT  Mailing Address   TANK ON ST.	Candidate name & Address or ↓ ↓  Mailing Address ↓ ↓  City ↓ ↓	Parent Entity (PACs Affiliate, or Sponso	<u>I</u>
Year Standing for Election:  Bank Account Name (must match committee name)  JOHNSON COUNTY GREEN CENTRAL COMMITTEE  Name of Financial Institution/type of Account  HILLS BANK CHECKING ACCOUNT  Mailing Address  The Annual St.  City I State I Zip I	Candidate name & Address or  Mailing Address    City    Phone ( )	Parent Entity (PACs Affiliate, or Sponso	<u>I</u>
Year Standing for Election:  Bank Account Name (must match committee name)  JOHNSON COUNTY GREEN CENTRAL COMMITTEE  Name of Financial Institution/type of Account  HILLS BANK CHECKING ACCOUNT  Mailing Address  I 3   MAIN ST.  City   State   Zip   HILLS    HILLS   TA 52235	Candidate name & Address or   Wailing Address   City   Phone ( )  e-Mail	Parent Entity (PACs Affiliate, or Sponso	<u>I</u>
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Year Standing for Election:  Bank Account Name (must match committee name)  JOHNSON COUNTY GREEN CENTRAL COMMITTEE  Name of Financial Institution/type of Account  HILLS BANK CHECKING ACCOUNT  Mailing Address  TAILS State J Zip J J  City J State J Zip J J  HILLS TA 5 2235  STATEMENT OF AFFIRMATION: By filing this document the committee affirm  1. The committee and all persons connected with the committee understand that the rules in Chapter 351 of the lowa Administrative Code.  2. That lowa Code section 68A.402 and rule 351—4.9 require the filing of disclosure.	Candidate name & Address or  Mailing Address    City    Phone ( )  e-Mail  ms the following:  they are subject to the laws in lowa Course reports and that the failure to file to	Parent Entity (PACs Affiliate, or Sponso  State    State    ode chapters 68A and	Zip ↓ ↓  68B and the administrative
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Date Signed

Signature of Candidate, OR, for all other committees, Chairperson